

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002943

FILED
Apr 28, 2005
Secretary of State

Entity Name: THE ELECT CHILDREN ACADEMY, INC.

Current Principal Place of Business:

214 EMERSON DR NW
SUITE 1
PALM BAY, FL 32907

New Principal Place of Business:

Current Mailing Address:

214 EMERSON DR NW
SUITE 1
PALM BAY, FL 32907

New Mailing Address:

FEI Number: 59-3719501

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BRADSHAW, CATHY W
609 GILBERT DR. NE
PALM BAY, FL 32907 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: BRADSHAW, CATHY W
Address: 609 GILBERT DR. NE
City-St-Zip: PALM BAY, FL 32907

Title: VD () Delete
Name: BRADSHAW, CRAIG A SR.
Address: 609 GILBERT DR. NE
City-St-Zip: PALM BAY, FL 32907

Title: SD () Delete
Name: THOMAS, ALVIN JR.
Address: 1034 GRANT ST
City-St-Zip: FELLSMERE, FL 32948

Title: D () Delete
Name: YOUNG, MARVIN
Address: 2838 BRENTWOOD LN
City-St-Zip: MELBOURNE, FL 32935

Title: D () Delete
Name: RICHARDSON, WANNA
Address: 1220 CREEL RD NE
City-St-Zip: PALM BAY, FL 32905

Title: D () Delete
Name: SCOTT LAWRENCE, MICHELLE
Address: 1771 RADISSON ST NW
City-St-Zip: PALM BAY, FL 32907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CATHY W. BRADSHAW

PRES

04/28/2005

Electronic Signature of Signing Officer or Director

Date